



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 4036

Bib Data Sheet

SERIAL NUMBER 10/632,678	FILING OR 371(c) DATE 08/01/2003 RULE	CLASS 530	GROUP ART UNIT 1656	ATTORNEY DOCKET NO. 100086.401C18
------------------------------------	---	---------------------	-------------------------------	---

APPLICANTS

Orest W. Blaschuk, Westmount, CANADA;

** CONTINUING DATA *****

This application is a CIP of 10/464,071 06/18/2003 ABN
 which is a CON of 09/544,782 04/07/2000 PAT 6,610,821
 which is a CIP of 09/458,870 12/10/1999 PAT 6,465,427
 which is a CIP of 09/357,717 07/20/1999 PAT 6,417,325
 which is a CIP of 09/248,074 02/10/1999 PAT 6,346,512
 which is a CIP of 08/996,679 12/23/1997 PAT 6,169,071
 which is a CIP of 08/893,534 07/11/1997 PAT 6,031,072
 which claims benefit of 60/021,612 07/12/1996
 This application 10/632,678
 is a CIP of 10/359,546 02/04/2003
 which is a CON of 09/248,015 02/10/1999 PAT 6,562,786
 which is a CIP of 08/996,679 12/23/1997 PAT 6,169,071
 which is a CIP of 08/893,534 07/11/1997 PAT 6,031,072
 which claims benefit of 60/021,612 07/12/1996

CMK

** FOREIGN APPLICATIONS *****

none CMK

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 11/05/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 61	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>CMK</i> Initials <i>CMK</i>				

ADDRESS

00500

TITLE

COMPOUNDS AND METHODS FOR MODULATING CELL ADHESION

FILING FEE RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
-----------------------------------	---	--